

4-H YOUTH/VOLUNTEER GROUP ENROLLMENT FORM

(Use reverse side for Volunteer Group Enrollments)

Date(s)/Yr.: _____ **Program/Project Name:** _____
County: _____ **Project Code:** _____
Location: _____ **Club ID (opt.):** _____
Presenter: _____ **No. of Contact Hours:** _____

Has this group been reached and recorded with 4-H/Extension programming earlier this year? Yes No

Delivery Mode: (Check One)	<input type="checkbox"/> Spec. Int.	<input type="checkbox"/> Overnight Camp	<input type="checkbox"/> Day Camp	<input type="checkbox"/> Sch. Enrich.	<input type="checkbox"/> Sch. Age Child Care
	<input type="checkbox"/> Comm. Club	<input type="checkbox"/> In-Sch. Club	<input type="checkbox"/> After-Sch. Club	<input type="checkbox"/> Military Club	<input type="checkbox"/> *Ind.Study/Fam.4-H

Note: *Typically youth in Ind.Study/Fam. 4-H or Club modes should be individually enrolled.

How many Youth Groups are being reported on this form? _____ **Unit(s)**

How many total?	How many of these youth are 4-H members or have been reported on a previous group this year?		
Gender	DUPLICATES:		
Male:	Female:	Male:	Female:

County User: Be sure to subtract the duplicates listed above from each of the following:

Residence	Farm	Rural	Town 10K-50K	Suburb 50K+	City 50K+
Non-duplicates					

Grade	K	1	2	3	4	5	6	7	8	9	10	11	12	13*	14**	15***
Non-duplicates																

*Post High School **Post High School, not in school ***Special Ed.

Please estimate the ethnic and racial distribution of the youth participants.

Ethnicity Non-duplicates	Total Hispanic		Total Non-Hispanic	
Race	White		White	
<i>The race categories MUST add up to the totals reported above for ethnicity.</i>	Black		Black	
	American Native		American Native	
	Asian		Asian	
	Hawaiian/Pac.Island		Hawaiian/Pac.Island	
	White & Black		White & Black	
	White & Am. Native		White & Am. Native	
	Black & Am. Native		Black & Am. Native	
	White & Asian		White & Asian	
	Other/Balance		Other/Balance	

VOLUNTEER GROUP ENROLLMENTS

Date(s)/Yr.: _____ **Program/Project Name:** _____
County: _____ **Project Code:** _____
Location: _____ **Club ID (opt.):** _____
Presenter: _____ **No. of Contact Hours:** _____

Note: Direct Volunteers and Middle Managers are to be individually-enrolled in most cases. The only exceptions are those volunteers who are screened by another organization. **Group-enrolled volunteers are not covered by WSU liability.**

No. of adult volunteers	Male	Female	No. of youth volunteers	Male	Female
Direct (contact w/kids)			Direct (contact w/kids)		
Indirect (no contact)			Indirect (no contact)		
Middle manager (lead others)			Middle manager (lead others)		
Duplicates (already recorded)			Duplicates (already recorded)		

Please estimate the ethnic and racial distribution of the volunteers (non-duplicates only).

Ethnicity of Adult Volunteers		Ethnicity of Youth Volunteers	
Hispanic		Hispanic	
Non-Hispanic		Non-Hispanic	

Race: The totals for the race categories must add up to the number reported above for ethnicity.

Adult Volunteers	Hispanic	Non-Hispanic	Youth Volunteers	Hispanic	Non-Hispanic
White			White		
Black			Black		
American Native			American Native		
Asian			Asian		
Hawaiian/Pac.Island			Hawaiian/Pac.Island		
White & Black			White & Black		
White & Am. Native			White & Am. Native		
Black & Am. Native			Black & Am. Native		
White & Asian			White & Asian		
Other/Balance			Other/Balance		

WASHINGTON STATE UNIVERSITY



4-H Youth Development Program

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